

SEG101A2203 Study Exploring the Effect of Crizanlizumab on Kidney Function in Patients With Chronic Kidney Disease Caused by Sickle Cell Disease

13/08/2025 14:18:05 Main Information Primary registry identifying number Protocol number LBCTR2020094586 SEG101A2203 MOH registration number Study registered at the country of origin Study registered at the country of origin: Specify Yes Type of registration Type of registration: Justify Prospective N/A Date of registration in national regulatory agency **Primary sponsor** Primary sponsor: Country of origin Novartis Pharmaceuticals **Novartis Pharmaceuticals** Date of registration in primary registry Date of registration in national regulatory agency 06/06/2022 Public title Acronym SEG101A2203 Study Exploring the Effect of Crizanlizumab on SEG101A2203 STEADEAST Kidney Function in Patients With Chronic Kidney Disease Caused by Sickle Cell Disease Scientific title Acronym A Phase II, Multicenter, Randomized, Open Label Two Arm Study Comparing the Effect of Crizanlizumab + Standard of Care to Standard of Care Alone on Renal Function in Sickle Cell Disease Patients ≥ 16 Years With Chronic Kidney Disease Due to Sickle Cell Nephropathy Brief summary of the study: English The goal of the study is to compare the efficacy and safety of crizanlizumab + standard of care to standard of care alone on renal function in sickle cell disease patients ≥ 16 years with chronic kidney disease due to sickle cell nephropathy. Brief summary of the study: Arabic دراسة مرحلة ثانية، متعددة المراكز، عشوانيَّة التوزيع، مفتوحة اللصاقة، من مجموعتين لمقارنة تأثير كريز انليزوماب + الرعاية المعتمدة سنة المصابين بمرض كلويّ مزمن ناتج عن اعتلال16بالر عاية المعتمدة لوحدها، على الوظيفة الكلويّة لدى مرضى داء الكريات المنجليّة > (STEADFAST) الكلية المنجلي Health conditions/problem studied: Specify Sickle Cell Disease (SCD)

Interventions: Specify

Drug: Crizanlizumab (SEG101)

Key inclusion and exclusion criteria: Inclusion criteria

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Confirmed diagnosis of SCD (HbSS and HbS β 0-thal SCD genotypes - Patients with eGFR ≥ 45 to ≤ 120 mL/min/1.73 m2 based on CKD E - Patients with ACR of ≥ 100 to < 2000 mg/g - Receiving standard of care drug(s) for SCD and/or CKD for at least - Hb ≥ 4.0 g/dL, absolute neutrophil count (ANC) ≥ 1.0 x 109/L, and p -Written informed consent (or assent/ parental consent for minor sub-	PI formula 6 months prior to study entry platelet count ≥ 75 x 109/L	95
Key inclusion and exclusion criteria: Gender	Key inclusion and exclusio	n criteria: Specify gender
Both	·	
Key inclusion and exclusion criteria: Age minimum	Key inclusion and exclusio	n criteria: Age maximum
16	99	
Key inclusion and exclusion criteria: Exclusion criteria		
 History of stem cell transplant Patients with evidence of AKI within 3 months of study entry Blood pressure > 140/90 mmHg despite treatment Patients undergoing hemodialysis Received blood products within 30 days of Week 1 Day 1 Participating in a chronic transfusion program History of kidney transplant Patients with hypoalbuminemia 		
Type of study		
Interventional		
Type of intervention	Type of intervention: Speci	fy type
Pharmaceutical	N/A	
Trial scope	Trial scope: Specify scope	
Therapy	N/A	
Study design: Allocation	Study design: Masking	
Randomized controlled trial	Open (masking not used)	
Study design: Control	Study phase	
N/A	2	
Study design: Purpose	Study design: Specify purp	ose
Treatment	N/A	
Church designs Assignment	Chudu daainmu Cuasifu aasi	
Study design: Assignment	Study design: Specify assign	gnment
Parallel	N/A	
IMP has market authorization	IMP has market authorization	on: Specify
Yes, Worldwide	US, albania, bahrain, brazil, i	ndia , UAE
Name of IMP	Year of authorization	Month of authorization
Crizanlizumab		
Type of IMP		
Immunological		
Pharmaceutical class		
Crizanlizumab is a concentrate for solution for infusion, i.v. use. Supp	aliad in aingle use 10 mL viale at a	

concentration of 10 mg/mL. One vial contains 100 mg of crizanlizumab Other Name: SEG101

Therapeutic indication

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Patients with: Sickle cell diseas				
Therapeutic benefit				
centage of patients with ≥ 30% decrease in albuminuria (ACR) [Time Frame: Baseline to 12 nths] evaluate the effect of crizanlizumab + standard of care compared to standard of care alone on uminuria (ACR) decrease				
Study model	Study model: Explain model			
N/A	N/A			
Study model: Specify model				
N/A				
Time perspective	Time perspective: Explain time perspective			
N/A	N/A			
Time perspective: Specify perspective				
N/A				
Target follow-up duration	Target follow-up duration: Unit			
Number of groups/cohorts				
Biospecimen retention	Biospecimen description			
Samples without DNA	Samples will be sent to Covance central lab			
Target sample size	Actual enrollment target size			
5	-			
Date of first enrollment: Type	Date of first enrollment: Date			
Anticipated	29/10/2020			
Date of study closure: Type	Date of study closure: Date			
Anticipated	29/08/2023			
Recruitment status	Recruitment status: Specify			
Pending				
Date of completion				
28/10/2021				
IPD charing statement plan	IPD charing statement description			
IPD sharing statement plan Yes	IPD sharing statement description			

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Novartis is committed to sharing with qualified external researchers, access to patient-level data and supporting clinical documents from eligible studies. These requests are reviewed and approved by an independent expert panel on the basis of scientific merit. All data provided is anonymized to respect the privacy of patients who have participated in the trial in line with applicable laws and regulations.

This trial data is currently available according to the process described on www.clinicalstudydatarequest.com.

Additional data URL

https://clinicaltrials.gov/ct2/show/record/NCT04053764?term=CSEG101A2203&draw=2&rank=1

Admin comments

Trial status

Approved

Secondary Identifying Numbers		
Full name of issuing authority	Secondary identifying number	
clinical trials.gov	NCT04053764	

Sources of Monetary or Material Support	
Name	
Novartis Pharmaceuticals	

Secondary Sponsors	
Name	
NA	

Contac	Contact for Public/Scientific Queries					
Contact type	Contact full name	Address	Country	Telephone	Email	Affiliation
Public	Adlette Inati	Tripoli	Lebanon	961322803 3	adlette.inati@lau. edu.lb	Nini Hospital
Scientific	Hind Khairallah	Beirut	Lebanon	961151200 2	Hind.Khairallah@ fattal.com.lb	Khalil Fattal et Fils





Centers/Hospitals Involved in the Study			
Center/Hospital name	Name of principles investigator	Principles investigator speciality	Ethical approval
Nini Hospital	Adlette Inati	Hematology	Approved

Ethics Review				
Ethics approval obtained	Approval date	Contact name	Contact email	Contact phone
Nini Hospital	17/08/2020	Nabil Kabbara	Nabil.kabbara@hopitalnini.com	961 (0) 6 431 400 ext 1062

Countries of Recruitment
Name
Lebanon
Brazil
France
Greece
Netherlands
Spain
Turkey

Health Conditions or Problems Studied		
Condition	Code Keyword	
Sickle cell	Sickle-cell disorders (D57)	SCD

Interventions		
Intervention	Description	Keyword
ICF-Labs-IMP administration-Questionnaires	ICF-Labs-IMP administration-Questionnaires	ICF-Labs-IMP administration-Questionnaires





Primary Outcomes		
Name	Time Points	Measure
To evaluate the effect of crizanlizumab + standard of care compared to standard of care alone on albuminuria (ACR) decrease	12 months	12 Months

Key Secondary Outcomes		
Name	Time Points	Measure
Mean change in albuminuria (ACR)	3,6,9,12 months	3,6,9,12 months
Percentage of patients with ≥ 30% decrease in albuminuria (ACR)	Baseline to 6 months	Baseline to 6 months
Percentage of patients with ≥ 20% improvement of protein to creatinine ratio (PCR)	Baseline to 12 months	Baseline to 12 months
Percentage of patients with a stable (within \pm 20% change) protein to creatinine ratio (PCR)	Baseline to 12 months	Baseline to 12 months
Percentage change in estimated glomerular filtration rate (eGFR)	Baseline to 3, 6, 9 and 12 months	Baseline to 3, 6, 9 and 12 months
Slope of albumin to creatinine ratio (ACR) decline	Baseline, 3, 6, 9, and 12 months	Baseline, 3, 6, 9, and 12 months
Slope of estimated glomerular filtration rate (eGFR) decline	Baseline to 3, 6, 9 and 12 months	Baseline to 3, 6, 9 and 12 months
Percentage of patients with progression of chronic kidney disease (CKD)	Baseline to 12 months	Baseline to 12 months
Immunogenicity: measurement of anti-drug antibodies (ADA) to crizanlizumab	Baseline to follow-up period	Baseline to follow-up period
Annualized rate of visits to emergency room and hospitalizations	Baseline to follow-up period	Baseline to follow-up period



Trial Results Summary results Study results globally Date of posting of results summaries Date of posting of results summaries Date of first journal publication of results Results URL link Baseline characteristics Participant flow Adverse events Outcome measures URL to protocol files